Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
SOUTH FLORIDA SURGICAL SPECIAL 401(K) PROFIT SHARING PLAN & TRUST

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 01/01/2009

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
SOUTH FLORIDA SURGICAL SPECIAL

3001 CORAL HILLS DR STE 320
POMPANO BEACH, FL 33065-4172

2b Employer Identification Number (EIN) 20-1759480

2c Plan Sponsor's telephone number 954-755-0111

2d Business code (see instructions) 621111

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/08/2026	ANTHONY M. WARD ESQ.
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor

ERISA FIDUCIARY SERVICES, INC.

1373 VETERANS HIGHWAY
SUITE 10
HAUPPAUGE, NY 11788

3b Administrator's EIN: 47-1637791

3c Administrator's telephone number: 631-249-0500

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

c Plan Name

4b EIN

4d PN

5	Total number of participants at the beginning of the plan year	**5**	269
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	178
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	160
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	77
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	237
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	237
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	215
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	212
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	2
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2A 2E 2F 2G 2J 2K 2T 3D 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)

- (1) [X] Insurance
- (2) [ ] Code section 412(e)(3) insurance contracts
- (3) [X] Trust
- (4) [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- (1) [X] Insurance
- (2) [ ] Code section 412(e)(3) insurance contracts
- (3) [X] Trust
- (4) [ ] General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) [X] **R** (Retirement Plan Information)
- (2) [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) [ ] **DCG** (Individual Plan Information) – Number Attached _____
- (5) [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) [X] **H** (Financial Information)
- (2) [ ] **I** (Financial Information – Small Plan)
- (3) [X] **A** (Insurance Information) – Number Attached 1
- (4) [X] **C** (Service Provider Information)
- (5) [X] **D** (DFE/Participating Plan Information)
- (6) [ ] **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☒ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☒ No

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
SOUTH FLORIDA SURGICAL SPECIAL 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
SOUTH FLORIDA SURGICAL SPECIAL

D Employer Identification Number (EIN)
20-1759480

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
STANDARD INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
93-0242990	69019	817063	9	01/01/2025	12/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
	1044

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	0		

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	
5	Current value of plan's interest under this contract in separate accounts at year end	5	1346841

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity (3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee (3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			7b	
c	Additions: (1) Contributions deposited during the year	7c(1)			
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)			
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below) ▶	7c(5)			
	(6) Total additions			7c(6)	0
d	Total of balance and additions (add lines **7b** and **7c(6)**)			7d	0
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)			
	(2) Administration charge made by carrier	7e(2)			
	(3) Transferred to separate account	7e(3)			
	(4) Other (specify below) ▶	7e(4)			
	(5) Total deductions			7e(5)	0
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- **a** ☐ Health (other than dental or vision)
- **b** ☐ Dental
- **c** ☐ Vision
- **d** ☐ Life insurance
- **e** ☐ Temporary disability (accident and sickness)
- **f** ☐ Long-term disability
- **g** ☐ Supplemental unemployment
- **h** ☐ Prescription drug
- **i** ☐ Stop loss (large deductible)
- **j** ☐ HMO contract
- **k** ☐ PPO contract
- **l** ☐ Indemnity contract
- **m** ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	0
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
SOUTH FLORIDA SURGICAL SPECIAL 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
SOUTH FLORIDA SURGICAL SPECIAL

D Employer Identification Number (EIN)
20-1759480

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

PAYCHEX SECURITIES CORPORATION
225 KENNETH DRIVE
ROCHESTER, NY 14623

16-1486352

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

FORTUNE FINANCIAL SERVICES INC

3582 BRODHEAD ROAD
SUITE 202
MONACA, PA 15061

25-1799740

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26	ADVISOR	37923	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [X]

(a) Enter name and EIN or address (see instructions)

PAYCHEX, INC.

911 PANORAMA TRAIL S
ROCHESTER, NY 14625

16-1124166

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	RECORDKEEPER	19658	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [X]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

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(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name: JORGE ALVARADO AND COMPANY CPA **b** EIN: 46-1694674

c Position: IQPA

d Address:

e Telephone:

Explanation: IQPA INDICATED THEY ARE NO LONGER DOING 401(K) PLAN AUDITS.

a Name: **b** EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name: **b** EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name: **b** EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name: **b** EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
SOUTH FLORIDA SURGICAL SPECIAL 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 002

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
SOUTH FLORIDA SURGICAL SPECIAL

D Employer Identification Number (EIN)
20-1759480

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE:	PRINCIPAL LIFETIME HYBRID INCOME Z		
b Name of sponsor of entity listed in (a):	PRINCIPAL GLOBAL TRUST INVESTORS		
c EIN-PN 26-6447574-011	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	117
a Name of MTIA, CCT, PSA, or 103-12 IE:	PRINCIPAL LIFETIME HYBRID 2015 Z CI		
b Name of sponsor of entity listed in (a):	PRINCIPAL GLOBAL TRUST INVESTORS		
c EIN-PN 26-6447574-002	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	145828
a Name of MTIA, CCT, PSA, or 103-12 IE:	PRINCIPAL LIFETIME HYBRID 2020 Z CI		
b Name of sponsor of entity listed in (a):	PRINCIPAL GLOBAL TRUST INVESTORS		
c EIN-PN 26-6447574-003	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	87395
a Name of MTIA, CCT, PSA, or 103-12 IE:	PRINCIPAL LIFETIME HYBRID 2025 Z CI		
b Name of sponsor of entity listed in (a):	PRINCIPAL GLOBAL TRUST INVESTORS		
c EIN-PN 26-6447574-004	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	656637
a Name of MTIA, CCT, PSA, or 103-12 IE:	PRINCIPAL LIFETIME HYBRID 2030 Z CI		
b Name of sponsor of entity listed in (a):	PRINCIPAL GLOBAL TRUST INVESTORS		
c EIN-PN 26-6447574-005	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	3077895
a Name of MTIA, CCT, PSA, or 103-12 IE:	PRINCIPAL LIFETIME HYBRID 2035 Z CI		
b Name of sponsor of entity listed in (a):	PRINCIPAL GLOBAL TRUST INVESTORS		
c EIN-PN 26-6447574-006	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	2544516
a Name of MTIA, CCT, PSA, or 103-12 IE:	PRINCIPAL LIFETIME HYBRID 2040 Z CI		
b Name of sponsor of entity listed in (a):	PRINCIPAL GLOBAL TRUST INVESTORS		
c EIN-PN 26-6447574-007	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	483690

a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL LIFETIME HYBRID 2045 Z CI

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL TRUST INVESTORS

c EIN-PN 26-6447574-008	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1484942

a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL LIFETIME HYBRID 2050 Z CI

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL TRUST INVESTORS

c EIN-PN 26-6447574-009	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 310358

a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL LIFETIME HYBRID 2055 Z CI

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL TRUST INVESTORS

c EIN-PN 26-6447574-010	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 263971

a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL LIFETIME HYBRID 2060 Z CI

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL TRUST INVESTORS

c EIN-PN 26-6447574-012	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 60222

a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL LIFETIME HYBRID 2065 Z CI

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL TRUST INVESTORS

c EIN-PN 26-6447574-013	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 31873

a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL LIFETIME HYBRID 2070 Z CI

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL TRUST INVESTORS

c EIN-PN 26-6447574-014	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2550

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
SOUTH FLORIDA SURGICAL SPECIAL 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
SOUTH FLORIDA SURGICAL SPECIAL

D Employer Identification Number (EIN)
20-1759480

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	562357	515759
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	83315	66424
(9) Value of interest in common/collective trusts	1c(9)	8673708	9149992
(10) Value of interest in pooled separate accounts	1c(10)	0	1346841
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	8122456	11001941
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		134865
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	17441836	22215822
Liabilities			
1g Benefit claims payable	1g	0	
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	17441836	22215822

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	515759	
(B) Participants	2a(1)(B)	1021781	
(C) Others (including rollovers)	2a(1)(C)	963846	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		2501386
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	6136	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		6136
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	765200	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		765200
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		2444477
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		5717199
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	829627	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		829627
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		6096
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	19459	
(3) Recordkeeping fees	2i(3)	0	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	37923	
(6) Bank or trust company trustee/custodial fees	2i(6)	860	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	49248	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		107490
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		943213
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		4773986
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: THOMAS & COMPANY CPA PA **(2)** EIN: 75-3125446

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) [ ] This form is filed for a CCT, PSA, DCG or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ..... ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
SOUTH FLORIDA SURGICAL SPECIAL 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
SOUTH FLORIDA SURGICAL SPECIAL

D Employer Identification Number (EIN)
20-1759480

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions ..... | 1 |

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 27-3169253

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year ..... | 3 |

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ Yes ☒ No ☐ N/A

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6	a	Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a
	b	Enter the amount contributed by the employer to the plan for this plan year	6b
	c	Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ Yes ☐ No ☐ N/A

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ Yes ☐ No ☐ N/A

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ Increase ☐ Decrease ☐ Both ☐ No

Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ Yes ☐ No

11 a Does the ESOP hold any preferred stock? ..... ☐ Yes ☒ No

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ Yes ☒ No

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ Yes ☒ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:
Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☒ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 08 / 31 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q704150A .

SOUTH FLORIDA SURGICAL SPECIALISTS LLC
401(K) PROFIT SHARING PLAN AND TRUST

FINANCIAL STATEMENTS AND
SUPPLEMENTARY SCHEDULES

AS OF DECEMBER 31, 2025, AND 2024
AND FOR THE YEAR ENDED DECEMBER 31,2025

SOUTH FLORIDA SURGICAL SPECIALISTS LLC 401(K) PROFIT SHARING PLAN AND TRUST

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* Other schedules required by Section 2520.103-10 of Department of Labor Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

INDEPENDENT AUDITORS' REPORT

To the Administrative Committee and Administrator of the
South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust
Coral Springs, FL

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed an audit of the accompanying financial statements of South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust, (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statement of net assets available for benefits as of December 31, 2025, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2025, and 2024, stating that the certified investment information, as described in Note 6 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section—

- the amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments; administering the plan; and determining that the plan's transactions that are presented and disclosed in the financial statements are in conformity with the plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Other Matter — Prior Period Financial Statements

The statement of net assets available for benefits of the Plan as of December 31, 2024 was audited by other auditors whose report dated October 4, 2025 expressed an unmodified opinion on the 2024 financial statements in accordance with ERISA Section 103(a)(3)(C). We were not engaged to audit the December 31, 2024, financial statements and, accordingly, we do not express an opinion. As described in Note 2, certain amounts in the 2024 financial statements have been reclassified to conform to the 2025 presentation.

Auditor’s Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the Plan’s Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust's ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplemental Schedules Required by ERISA

The supplemental schedules of Schedule of Assets (Held at End of Year) as of December 31, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).



Thomas & Company CPA PA
Cooper City, Florida
September 30, 2026

SOUTH FLORIDA SURGICAL SPECIALISTS 401(K) PROFIT SHARING PLAN AND TRUST
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF DECEMBER 31, 2025 AND 2024

	2025	2024
ASSETS		
Investments		
Investments, at fair value	$ 21,498,774	$ 16,663,827
Investments, at contract value	134,865	132,337
Total Investments	21,633,639	16,796,164
Receivables		
Notes Receivable from Participants	66,424	83,315
Employer Contributions	515,759	562,357
Total Receivables	582,183	645,672
NET ASSETS AVAILABLE FOR BENEFITS	$ 22,215,822	$ 17,441,836

The accompanying notes are an integral part of these financial statements.

SOUTH FLORIDA SURGICAL SPECIALISTS 401(K) PROFIT SHARING PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2025

Additions To Net Assets Attributed To:	2025
Investment Income:	
Interest And Dividends	$ 771,336
Net Appreciation/(Depreciation) In Value Of Investments	2,444,477
Total Investment Income/(Loss)	3,215,813
Contributions:	
Participant	
Participant Roth Deferrals	178,329
Participant Rollover Contributions	963,846
Participant Contributions	843,452
Employer	
Employer Profit Sharing Contributions	309,987
Employer Safe Harbor Contributions	205,772
Total Contributions	2,501,386
Total Additions/(Reductions)	5,717,199
Deductions From Net Assets Attributable To:	
Benefits Paid To Participants And Other	835,723
Administrative Expenses	58,290
Uncollectible Employer Contributions - 2024 Allocations	49,200
Total Deductions	943,213
Net Increase/(Decrease)	4,773,986
Net Assets Available For Benefits Beginning Of Year	17,441,836
End Of Year	$ 22,215,822

The accompanying notes are an integral part of these financial statements.

NOTE 1 – DESCRIPTION OF PLAN

The following description of the South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement for a complete description of the Plan's provisions.

General

The Plan is organized as a defined contribution plan under Section 401 of the Internal Revenue Code and covers substantially all eligible employees of South Florida Surgical Specialists LLC (the "Company" or "Employer"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA") and is administered by the plan administrator appointed by the Board of Directors of the Employer. The Plan was established effective January 1, 2009.

Plan Administration

The Company utilizes Paychex as the plan administrator in order to manage the operation and administration of the Plan. The Plan's assets were maintained by Mid-Atlantic Trust Company (Mid- Atlantic) (the "Custodian"), which is the qualified institution that prepared and certified the investment information described in Note 6. Mid-Atlantic handles the management and investment of contributions from participants for cash received, interest and dividend income earned and the execution of distributions to participants.

Eligibility

Generally, all employees who have completed at least 12 months of service and are age 21 or older are eligible to participate in the Plan. Collective Bargaining employees and non-resident aliens are not eligible. Employees are eligible to receive employer matching and profit-sharing contributions when they complete one year of service and 1,000 hours and are employed on the last day of the Plan year. Lastly, non-HCE participants are eligible for safe harbor non-elective contributions.

Contributions

Each year, participants may contribute up to the maximum deferral percentage (92% of eligible compensation). Participants who have attained age 50 before the end of the Plan year are eligible to make catch up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan.

The Plan is a safe harbor plan. The Company makes a safe harbor nonelective contribution equal to 3% of eligible compensation for eligible non-highly compensated participants. The Company may also make a discretionary profit-sharing contribution.

Participant Accounts

Each participant's account is credited with the participant's contribution, an allocation of the Company's discretionary profit-sharing contributions and Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participants' compensation, annual salary deferrals, or account balances according to Plan provisions. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

NOTE 1 – DESCRIPTION OF PLAN (Cont.)

Vesting

Participants are immediately vested in their own contributions plus actual earnings thereon and in the safe harbor nonelective contribution. Vesting in the discretionary profit-sharing portion of their accounts is based on years of continuous service, as follows:

Less than 2 years of service	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 or more years	100%

A participant will also be 100% vested under any of the following circumstances:

- Death before retirement date.
- Disability before retirement date.
- Attainment of normal retirement age.
- Plan Termination

In addition, a participant is immediately l00% vested in any amount which has been transferred or rolled over into the Plan from another qualified employee benefit plan.

Note Receivable from Participants (Participant Loans)

Participants may borrow from their accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance if they qualify under one of the hardship requirements by the Plan. Hardships under the Plan involve medical expenses and expenses related to the loss of their primary residence. The notes are secured by the balance in the participant's account and bear interest at 1% above the prime rates at the time of the loan. The loans are to be repaid through equal monthly installments for maximum payback period of ten years under certain circumstances. Principal and interest are repaid through payroll deductions.

Payment of Benefits

Upon termination of service, a participant may elect to receive a lump sum amount equal to the participant's vested interest in his or her account. For vested transferred money purchase pension accounts, participants may elect to receive a lump sum payment or an annuity form of benefit payment. As of December 31, 2025, benefits paid to participants totaled $ 835,723. A participant may generally withdraw funds from any of his accounts under the Plan prior to his retirement for any of the following reasons:

- Severance of employment
- Death
- Disability
- Attained age of 59 ½
- Plan termination
- Hardship

In addition, a participant may withdraw his rollover contribution accounts at any time subject to IRS limitations.

NOTE 1 – DESCRIPTION OF PLAN (Cont.)

Forfeitures
Forfeited non-vested amounts are retained in the Plan and are used to reduce future Company contributions or to pay Plan expenses. As of December 31, 2025, and 2024, forfeited nonvested accounts totaled $0 and $0.

Plan Termination
Although it has not expressed any intention to do so, the Employer has the right under the Plan to discontinue its contributions and to terminate the Plan subject to the provisions set forth in ERISA.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting
The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Use of Estimates
The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets, liabilities, and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of additions and deductions to net assets available for benefits during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition
Investments are reported at fair value, except for fully benefit-responsive investment contracts, which are reported at contract value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan Administrator determines the Plan's valuation policies utilizing information provided by the investment adviser and the Custodian. See Note 4 for a discussion of fair value measurements and Note 5 for a discussion of the Plan's fully benefit-responsive investment contract.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation in fair value of investments includes the Plan's realized gains and losses on investments bought and sold as well as the unrealized appreciation and depreciation on investments held during the year.

Notes Receivable from Participants / Participant loans
Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Interest income on notes receivable from participants was $6,136 and $6,137 for the years ended December 31, 2025, and 2024, respectively, and is included in interest and dividends in the statement of changes in net assets available for benefits. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred.

If a participant ceases making loan repayments and the Plan Administrator deems the loan to be in default, the loan balance is reduced, and the delinquent note receivable is recorded as a benefit payment based on the terms of the plan document. During the years ended December 31, 2025, and 2024, participant loans with an aggregate principal balance of $1,245 and $0, respectively were deemed distributed. Amounts deemed distributed are not reported as assets of the Plan. No allowance for credit losses has been recorded as of December 31, 2025, or 2024.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Payment of Benefits
Benefits are recorded when paid.

Excess Contributions Payable
Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as a liability with a corresponding reduction to contributions.

Plan Expenses
Plan expenses are paid by the Plan. Plan expenses include third party administration, audit fees, and investment expenses. Investment expenses include brokerage, investment management, investment consulting and clearing and custody fees. Some of these expenses are shown separately on the financial statements. Some investment related expenses are included in net appreciation of fair value of investments. Administrator may elect to charge specific processing and administrative fees of the Plan against the account of the participant who is responsible for the expense, including, but not limited to, such annual fees charged for the processing and administration of a participant's rollover account.

Reclassifications

Certain amounts in the 2024 financial statements have been reclassified to conform to the 2025 presentation. These reclassifications had no effect on net assets available for benefits or on the net increase in net assets available for benefits as previously reported.

Income Taxes
The Plan adopted a volume submitter profit sharing plan that received a favorable opinion letter from the Internal Revenue Service (IRS) on March 30, 2012, which stated that the volume submitter profit sharing plan, as then designed, was in accordance with the applicable sections of the Internal Revenue Code (IRC). The Plan has not received an opinion letter specific to the Plan, and the Plan has not been amended since receiving the opinion letter; however, the Plan administrator believes the Plan is designed and operated in compliance with the applicable requirements of the IRC.

U. S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2025, and 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2022.

Risk and Uncertainties
The Plan provides for various investment options. These investments are exposed to various risks, such as interest rate, market, and credit. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of such investment securities, it is at least reasonably possible that changes in risks in the near term could materially affect participants' account balances and the amounts reported in the statement of net assets available for plan benefits and statement of changes in net assets available for plan benefits.

NOTE 3 – PARTY-IN-INTEREST TRANSACTIONS AND ADMINISTRATION OF PLAN ASSETS

A party-in-interest is defined as a fiduciary or employee of the Plan, any person who provides service to the plan, an employer whose employees are covered by the plan, an employee organization whose members are covered by the plan, a person who owns 50 percent or more of such an employer or employee organization, or a relative of such persons mentioned.

The Plan's investments are held in participant directed accounts at Mid Atlantic Trust Company, the Custodian; therefore, any transaction executed with the Custodian qualifies as a party-in-interest transaction. Certain costs are incurred as transactions occur; these costs are included in the price of investments bought and sold and are not separately quantifiable.

The Plan's records are maintained by Paychex, the third-party administrator and recordkeeper of the Plan; therefore, any transaction executed with the third-party administrator qualifies as a party-in-interest transaction. There are no transactions with the third-party administrator other than payment for its services. For the year ended December 31, 2025, administrative expenses paid from Plan assets totaled $58,290.

Notes receivable from participants also qualify as party-in-interest transactions and totaled $66,424 and $83,315 as of December 31, 2025 and 2024, respectively.

The Plan Sponsor is a party in interest. Certain administrative functions are performed by employees of the Plan Sponsor. No such employee receives compensation from the Plan.

NOTE 4 – FAIR VALUE MEASUREMENTS

The Plan’s investments are reported at fair value in the accompanying statement of net assets available for benefits.

ASC 820, *Fair Value Measurements*, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs were used only when Level 1 or Level 2 inputs were not available.

ASC 820 establishes a three-level valuation hierarchy for measurement and disclosure of fair value. The valuation hierarchy is based upon the transparency of inputs used to measure fair value. The three levels are as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

NOTE 4 – FAIR VALUE MEASUREMENTS (Cont.)

Level 2 – Inputs to the valuation methodology include: quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – significant unobservable inputs (including management's own assumptions in determining the fair value of investments).

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2025, and 2024.

Mutual Funds: Valued at the daily closing price as reported by the fund. Mutual funds (Investments, at fair value) held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Collective investment trusts and pooled separate accounts: Valued at the net asset value per unit of the fund, as a practical expedient. The net asset value is based on the fair value of the underlying investments held by the fund less its liabilities. These investments are redeemable at net asset value on a daily basis and have no unfunded commitments. In accordance with accounting guidance, investments measured at net asset value as a practical expedient are not classified within the fair value hierarchy.

The following tables present the level within the fair value hierarchy at which the Plan's financial assets are measured on a recurring basis as of December 31, 2025, and 2024:

		Fair Value Measurements Using:		
Assets at December 31, 2025	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual Funds	$ 11,001,941	$ 11,001,941	$ -	$ -
Collective Investment Trusts	9,149,992	-	-	-
Pooled Separate Accounts	1,346,841	-	-	-
Total	$ 21,498,774	$ 11,001,941	$ -	$ -

NOTE 4 – FAIR VALUE MEASUREMENTS (Cont.)

		Fair Value Measurements Using:		
Assets at December 31, 2024	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual Funds	$ 8,541,371	$ 8,541,371	$ -	$ -
Collective investment trusts	7,240,637			
Pooled Separate Accounts	881,819			
Total	$ 16,663,827	$ 8,541,371	$ -	$ -

In accordance with ASC Subtopic 820-10, Investments, at contract value (fully benefit-responsive investment contracts) are measured at contract value rather than fair value. As a result, these investments have not been classified within the fair value hierarchy. See note 5.

NOTE 5 - FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT

The Plan has a fully benefit-responsive investment contract (FBRIC) with Standard. This contract meets the fully benefit-responsive investment contract criteria and therefore is reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan. Contract value represents contributions made under each contract, plus earnings, less participant withdrawals and administrative expenses. As of December 31, 2025, and 2024, the FBRICs contract value was $134,865 and $132,337 respectively.

December 31,	2025	2024
Investments, at contract value	$ 134,865	$ 132,337

The investment contract held by the Plan is a traditional guaranteed investment contract. The contract issuer is contractually obligated to repay the principal and interest at a specified interest rate, that is guaranteed to the Plan. The crediting rate is based on a formula established by the contract issuer. The crediting rate is reviewed on a quarterly basis for resetting.

The Plan's ability to receive amounts due in accordance with the FBRIC is dependent on the third-party issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments. Certain events, such as the premature termination of the contract by the Plan, partial or total termination of the Plan, divestitures, layoffs, and the liberalization of plan withdrawal or transfer rules may limit the Plan's ability to transact at contract value with Standard.

NOTE 5 - FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT (Cont.)

Standard may terminate the contract with 30 days advance written notice to the contract owner for reasonable cause, which includes the contract owner's failure to abide by state or federal law, failure to render performance necessary to comply with the terms of the contract, failure to maintain assets of at least $25,000, and plan disqualification.

No events are probable of occurring that would limit the Plan's ability to transact at contract value with the Plan participants or issuers.

NOTE 6 - INFORMATION PREPARED AND CERTIFIED BY THE CUSTODIANS

All Investment information presented in the accompanying financial statements and supplemental schedules, including investments held and net appreciation/depreciation in fair value of investments and interest and dividends, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by the custodian, Mid Atlantic Trust Company, in accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Accordingly, Mid Atlantic Trust Company, the Custodian, has certified that the following information included in the accompanying financial statements and supplemental schedule is complete and accurate:

- Investments held as shown in the statement of net assets available for benefits as of December 31, 2025;
- Net appreciation in fair value of investments, and interest and dividends, as shown in the statement of changes in net assets available for benefits for the year ended December 31, 2025; and
- All information in Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2025.

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as complete and accurate by the custodians as of December 31:

Investments	**2025**	**2024**
Investments, at fair value	$ 21,498,774	$ 16,663,827
Investments, at contract value	134,865	132,337
Total	**$ 21,633,639**	**$ 16,796,164**

Investment Income	Year Ended December 31, 2025	Year Ended December 31, 2024
Net Appreciation/(Depreciation) in Value of Investments	$ 2,444,477	$ 1,558,099
Interest and Dividends	765,200	655,026
Total Certified Investment Income	**$ 3,209,677**	**$ 2,213,125**
Interest on Notes Receivable from Participants (Not Certified)	6,136	6,137
Total Investment Income/(Loss)	**$ 3,215,813**	**$ 2,219,262**

NOTE 6 - INFORMATION PREPARED AND CERTIFIED BY THE CUSTODIANS (Cont.)

Interest income on notes receivable from participants of $6,136 and $6,137 for the years ended December 31, 2025 and 2024, respectively, is not covered by the certification because participant loans are not held by the Custodian. Those amounts are included in interest and dividends in the statement of changes in net assets available for benefits.

NOTE 7 – EMPLOYER CONTRIBUTION RECEIVABLE

The employer contribution receivable consists of the following:

	2025	2024
Safe Harbor Non-Elective Contribution	$ 205,772	$ 164,642
Discretionary Profit-Sharing Contribution	309,987	397,715
Total employer contribution receivable	**$ 515,759**	**$ 562,357**

The 2025 employer contribution of $515,759 comprises the safe harbor nonelective contribution of $205,772 and the discretionary profit-sharing contribution of $309,987. No portion of the 2025 employer contribution had been deposited to the Trust as of December 31, 2025. The amount was funded during 2026. See Note 12.

NOTE 8 – UNCOLLECTIBLE EMPLOYER CONTRIBUTIONS – 2024 ALLOCATIONS

During 2025, the Plan wrote off $49,200 of 2024 employer contributions receivable related to discretionary profit-sharing allocations for two participants. The participants declined the allocations, and the Plan Sponsor directed that the amounts not be funded and any amounts already credited be returned. Management determined the receivable would not be collected.

The write-off is presented separately as “Uncollectible employer contributions—2024 allocations” in the 2025 statement of changes in net assets available for benefits. It was recognized as a change in accounting estimate in 2025; beginning net assets and the 2024 financial statements were not restated.

NOTE 9 – INVESTMENTS REPRESENTING 5% OR MORE OF NET ASSETS

The following information represents investments that represent 5% or more of the Plan’s Assets as of December 31:

Interest in investments	2025	2024
Principal Lifetime Hybrid 2030 CIT	$ 3,077,895	$ 2,611,681
Fidelity Nasdaq Composite Index Fund	2,554,718	2,072,862
Principal Lifetime Hybrid 2035 CIT	2,544,515	2,239,853
American Funds Washington Mutual Investors Fund Class R6	1,852,487	1,571,742
American Funds Fundamental Investors Class R6	1,677,708	1,358,161
Principal Lifetime Hybrid 2045 CIT	1,484,942	-
Principal Large Cap S&P 500 Index Separate Account	1,288,446	-

NOTE 10 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of Net Assets Available for Benefits per the financial statements to the Form 5500 for the year ending December 31, 2025, and 2024, respectively:

	DECEMBER 31,	
	2025	2024
Net Assets Available for Benefits as Per F/S	$ 22,215,822	$ 17,441,836
Net Assets Available for Benefits as Per 5500	$ 22,215,822	$ 17,441,836

The following is a reconciliation of the Changes in Net Assets Available for Benefits per the financial statements to the Form 5500 for the year ending December 31, 2025, and 2024, respectively:

	DECEMBER 31,	
	2025	2024
Changes in Net Assets Available for Benefits as Per F/S	$ 4,773,986	$ 3,698,771
Changes in Net Assets Available for Benefits as per 5500	$ 4,773,986	$ 3,698,771

NOTE 11 – ERISA FIDELITY BOND

The Plan has complied with the fidelity bonding requirements of ERISA and is covered by a fidelity bond of $500,000 for the years ended December 31, 2025, and 2024, respectively.

NOTE 12 – SUBSEQUENT EVENTS

ASC Topic 855, Subsequent Events, establishes general standards of accounting for and disclosure of events that occur after the statement of net assets available for benefits date but before financial statements are issued or are available to be issued. For the year ended December 31, 2025, management has evaluated all subsequent events through September 30, 2026, which is the date the financial statements were available to be issued.

During 2026, the Company funded the 2025 employer contribution of $515,759 recorded as a receivable at December 31, 2025. No other subsequent events were identified that require recognition or disclosure in the financial statements.

SOUTH FLORIDA SURGICAL SPECIALISTS 401(K) PROFIT SHARING PLAN AND TRUST

SUPPLEMENTARY SCHEDULES
DECEMBER 31, 2025

EIN: 20-1759480
Plan Number: 002

(a)	(b) Identity of Issuer, borrower, lessor or similar party	(c) Description of Investment	**(d) Cost	(e) Current Value
	GUARANTEED INVESTMENT CONTRACT			
	Standard	Stable Asset Fund Class II	**	$ 134,865
	MUTUAL FUNDS:			
	American Beacon	Registered Investment Company - Large Cap Value Fund R6 Class	**	1,097,059
	American Beacon	Registered Investment Company - Small Cap Value Fund R6 Class	**	144,461
	The American Funds	Registered Investment Company - Fundamental Investors Class R6	**	1,677,708
	The American Funds	Registered Investment Company - New World Fund Class R6	**	47,503
	The American Funds	Registered Investment Company - Washington Mutual Investors Fund Class R6	**	1,852,487
	The American Funds	Registered Investment Company - Income Fund of America Class R6	**	253,957
	Calvert Asset Management	Registered Investment Company - Calvert Income Fund	**	30,236
	Clearbridge	Registered Investment Company - Growth Fund Class IS	**	139,047
	Cohen & Steers	Registered Investment Company - Realty Share Fund Class Z	**	53,153
	Dimensional Fund Advisors	Registered Investment Company - U.S. Targeted Value Portfolio Institutional Class	**	31,925
	Fidelity	Registered Investment Company - Nasdaq Composite Index Fund	**	2,554,718
	Franklin Templeton	Registered Investment Company - Foreign Fund Class R6	**	5,073
	Franklin Templeton	Registered Investment Company - Templeton Global Bond Fund Class R6	**	112,381
	Janus Henderson	Registered Investment Company - Enterprise Fund Class N	**	433,393
	Janus Henderson	Registered Investment Company - Mid Cap Value Fund Class N	**	102,659
	Mainstay Funds	Registered Investment Company - High Yield Corporate Bond Fund Class I	**	44,619
	PIMCO Funds	Registered Investment Company - Income Fund Class I-2	**	45,671
	PIMCO Funds	Registered Investment Company - Long Duration Total Return Fund Institutional Class	**	105
	PIMCO Funds	Registered Investment Company - Stock Plus Intl I Fund	**	59,724
	The Royce Funds	Registered Investment Company - Small Company Growth I Fund	**	320,663
	Thornburg Mutual Funds	Registered Investment Company - International Value R6 Fund	**	371,071
	Vanguard Group	Registered Investment Company - Capital Cycles Fund Investor Shares	**	334,798
	Vanguard Group	Registered Investment Company - Windsor Fund Admiral Shares	**	1,042,880
	Vanguard Group	Registered Investment Company - Developed Markets Index Fund Admiral Shares	**	176,755
	Vanguard Group	Registered Investment Company - Inflation Protected Securites Fund Admiral Shares	**	69,895
		Total Mutual Funds		**11,001,941**
	POOLED SEPARATE ACCOUNTS:			
	Principal Life Insurance Company	Pooled Separate Accounts - Large Cap S&P 500 Index Fund Institutional Class	**	1,288,446
	Principal Life Insurance Company	Pooled Separate Accounts - Mid Cap S&P 400 Index Fund Class R6	**	12,092
	Principal Life Insurance Company	Pooled Separate Accounts - Small Cap S&P 600 Index Fund Class R6	**	46,303
		Total Pooled Separate Accounts		**1,346,841**
	COLLECTIVE INVESTMENT TRUSTS:			
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid Income CIT	**	116
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2015 CIT	**	145,828
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2020 CIT	**	87,395
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2025 CIT	**	656,637
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2030 CIT	**	3,077,895
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2035 CIT	**	2,544,515
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2040 CIT	**	483,690
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2045 CIT	**	1,484,942
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2050 CIT	**	310,358
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2055 CIT	**	263,971
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2060 CIT	**	60,222
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2065 CIT	**	31,873
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2070 CIT	**	2,550
		Total Collective Investment Trusts		**9,149,992**
	PARTICIPANT LOANS:			
*	Note Receivable from Participants	Interest Rates Ranges from 4.25% to 9.5%, maturing no later than April 2029	**	66,424
		Grand Total		**$ 21,700,063**

* Represents a party-in-interest.
** All investments are participant directed and historical cost information is not maintained by the Plan custodian;
therefore, it is not included in the above Schedule of Assets Held at End of Year.

The information in this schedule has been certified as to its completeness and accuracy by the Plan custodian.

SOUTH FLORIDA SURGICAL SPECIALISTS LLC
401(K) PROFIT SHARING PLAN AND TRUST

FINANCIAL STATEMENTS AND
SUPPLEMENTARY SCHEDULES

AS OF DECEMBER 31, 2025, AND 2024
AND FOR THE YEAR ENDED DECEMBER 31,2025

SOUTH FLORIDA SURGICAL SPECIALISTS LLC 401(K) PROFIT SHARING PLAN AND TRUST

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* Other schedules required by Section 2520.103-10 of Department of Labor Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

INDEPENDENT AUDITORS' REPORT

To the Administrative Committee and Administrator of the
South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust
Coral Springs, FL

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed an audit of the accompanying financial statements of South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust, (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statement of net assets available for benefits as of December 31, 2025, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2025, and 2024, stating that the certified investment information, as described in Note 6 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section—

- the amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments; administering the plan; and determining that the plan's transactions that are presented and disclosed in the financial statements are in conformity with the plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Other Matter — Prior Period Financial Statements

The statement of net assets available for benefits of the Plan as of December 31, 2024 was audited by other auditors whose report dated October 4, 2025 expressed an unmodified opinion on the 2024 financial statements in accordance with ERISA Section 103(a)(3)(C). We were not engaged to audit the December 31, 2024, financial statements and, accordingly, we do not express an opinion. As described in Note 2, certain amounts in the 2024 financial statements have been reclassified to conform to the 2025 presentation.

Auditor’s Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the Plan’s Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust's ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplemental Schedules Required by ERISA

The supplemental schedules of Schedule of Assets (Held at End of Year) as of December 31, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).



Thomas & Company CPA PA
Cooper City, Florida
September 30, 2026

SOUTH FLORIDA SURGICAL SPECIALISTS 401(K) PROFIT SHARING PLAN AND TRUST
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF DECEMBER 31, 2025 AND 2024

	2025	2024
ASSETS		
Investments		
Investments, at fair value	$ 21,498,774	$ 16,663,827
Investments, at contract value	134,865	132,337
Total Investments	21,633,639	16,796,164
Receivables		
Notes Receivable from Participants	66,424	83,315
Employer Contributions	515,759	562,357
Total Receivables	582,183	645,672
NET ASSETS AVAILABLE FOR BENEFITS	$ 22,215,822	$ 17,441,836

The accompanying notes are an integral part of these financial statements.

SOUTH FLORIDA SURGICAL SPECIALISTS 401(K) PROFIT SHARING PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2025

Additions To Net Assets Attributed To:	2025
Investment Income:	
Interest And Dividends	$ 771,336
Net Appreciation/(Depreciation) In Value Of Investments	2,444,477
Total Investment Income/(Loss)	3,215,813
Contributions:	
Participant	
Participant Roth Deferrals	178,329
Participant Rollover Contributions	963,846
Participant Contributions	843,452
Employer	
Employer Profit Sharing Contributions	309,987
Employer Safe Harbor Contributions	205,772
Total Contributions	2,501,386
Total Additions/(Reductions)	5,717,199
Deductions From Net Assets Attributable To:	
Benefits Paid To Participants And Other	835,723
Administrative Expenses	58,290
Uncollectible Employer Contributions - 2024 Allocations	49,200
Total Deductions	943,213
Net Increase/(Decrease)	4,773,986
Net Assets Available For Benefits Beginning Of Year	17,441,836
End Of Year	$ 22,215,822

The accompanying notes are an integral part of these financial statements.

NOTE 1 – DESCRIPTION OF PLAN

The following description of the South Florida Surgical Specialists LLC 401(K) Profit Sharing Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement for a complete description of the Plan's provisions.

General

The Plan is organized as a defined contribution plan under Section 401 of the Internal Revenue Code and covers substantially all eligible employees of South Florida Surgical Specialists LLC (the "Company" or "Employer"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA") and is administered by the plan administrator appointed by the Board of Directors of the Employer. The Plan was established effective January 1, 2009.

Plan Administration

The Company utilizes Paychex as the plan administrator in order to manage the operation and administration of the Plan. The Plan's assets were maintained by Mid-Atlantic Trust Company (Mid- Atlantic) (the "Custodian"), which is the qualified institution that prepared and certified the investment information described in Note 6. Mid-Atlantic handles the management and investment of contributions from participants for cash received, interest and dividend income earned and the execution of distributions to participants.

Eligibility

Generally, all employees who have completed at least 12 months of service and are age 21 or older are eligible to participate in the Plan. Collective Bargaining employees and non-resident aliens are not eligible. Employees are eligible to receive employer matching and profit-sharing contributions when they complete one year of service and 1,000 hours and are employed on the last day of the Plan year. Lastly, non-HCE participants are eligible for safe harbor non-elective contributions.

Contributions

Each year, participants may contribute up to the maximum deferral percentage (92% of eligible compensation). Participants who have attained age 50 before the end of the Plan year are eligible to make catch up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan.

The Plan is a safe harbor plan. The Company makes a safe harbor nonelective contribution equal to 3% of eligible compensation for eligible non-highly compensated participants. The Company may also make a discretionary profit-sharing contribution.

Participant Accounts

Each participant's account is credited with the participant's contribution, an allocation of the Company's discretionary profit-sharing contributions and Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participants' compensation, annual salary deferrals, or account balances according to Plan provisions. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

NOTE 1 – DESCRIPTION OF PLAN (Cont.)

Vesting

Participants are immediately vested in their own contributions plus actual earnings thereon and in the safe harbor nonelective contribution. Vesting in the discretionary profit-sharing portion of their accounts is based on years of continuous service, as follows:

Less than 2 years of service	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 or more years	100%

A participant will also be 100% vested under any of the following circumstances:

- Death before retirement date.
- Disability before retirement date.
- Attainment of normal retirement age.
- Plan Termination

In addition, a participant is immediately l00% vested in any amount which has been transferred or rolled over into the Plan from another qualified employee benefit plan.

Note Receivable from Participants (Participant Loans)

Participants may borrow from their accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance if they qualify under one of the hardship requirements by the Plan. Hardships under the Plan involve medical expenses and expenses related to the loss of their primary residence. The notes are secured by the balance in the participant's account and bear interest at 1% above the prime rates at the time of the loan. The loans are to be repaid through equal monthly installments for maximum payback period of ten years under certain circumstances. Principal and interest are repaid through payroll deductions.

Payment of Benefits

Upon termination of service, a participant may elect to receive a lump sum amount equal to the participant's vested interest in his or her account. For vested transferred money purchase pension accounts, participants may elect to receive a lump sum payment or an annuity form of benefit payment. As of December 31, 2025, benefits paid to participants totaled $ 835,723. A participant may generally withdraw funds from any of his accounts under the Plan prior to his retirement for any of the following reasons:

- Severance of employment
- Death
- Disability
- Attained age of 59 ½
- Plan termination
- Hardship

In addition, a participant may withdraw his rollover contribution accounts at any time subject to IRS limitations.

NOTE 1 – DESCRIPTION OF PLAN (Cont.)

Forfeitures
Forfeited non-vested amounts are retained in the Plan and are used to reduce future Company contributions or to pay Plan expenses. As of December 31, 2025, and 2024, forfeited nonvested accounts totaled $0 and $0.

Plan Termination
Although it has not expressed any intention to do so, the Employer has the right under the Plan to discontinue its contributions and to terminate the Plan subject to the provisions set forth in ERISA.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting
The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Use of Estimates
The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets, liabilities, and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of additions and deductions to net assets available for benefits during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition
Investments are reported at fair value, except for fully benefit-responsive investment contracts, which are reported at contract value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan Administrator determines the Plan's valuation policies utilizing information provided by the investment adviser and the Custodian. See Note 4 for a discussion of fair value measurements and Note 5 for a discussion of the Plan's fully benefit-responsive investment contract.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation in fair value of investments includes the Plan's realized gains and losses on investments bought and sold as well as the unrealized appreciation and depreciation on investments held during the year.

Notes Receivable from Participants / Participant loans
Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Interest income on notes receivable from participants was $6,136 and $6,137 for the years ended December 31, 2025, and 2024, respectively, and is included in interest and dividends in the statement of changes in net assets available for benefits. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred.

If a participant ceases making loan repayments and the Plan Administrator deems the loan to be in default, the loan balance is reduced, and the delinquent note receivable is recorded as a benefit payment based on the terms of the plan document. During the years ended December 31, 2025, and 2024, participant loans with an aggregate principal balance of $1,245 and $0, respectively were deemed distributed. Amounts deemed distributed are not reported as assets of the Plan. No allowance for credit losses has been recorded as of December 31, 2025, or 2024.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Payment of Benefits
Benefits are recorded when paid.

Excess Contributions Payable
Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as a liability with a corresponding reduction to contributions.

Plan Expenses
Plan expenses are paid by the Plan. Plan expenses include third party administration, audit fees, and investment expenses. Investment expenses include brokerage, investment management, investment consulting and clearing and custody fees. Some of these expenses are shown separately on the financial statements. Some investment related expenses are included in net appreciation of fair value of investments. Administrator may elect to charge specific processing and administrative fees of the Plan against the account of the participant who is responsible for the expense, including, but not limited to, such annual fees charged for the processing and administration of a participant's rollover account.

Reclassifications

Certain amounts in the 2024 financial statements have been reclassified to conform to the 2025 presentation. These reclassifications had no effect on net assets available for benefits or on the net increase in net assets available for benefits as previously reported.

Income Taxes
The Plan adopted a volume submitter profit sharing plan that received a favorable opinion letter from the Internal Revenue Service (IRS) on March 30, 2012, which stated that the volume submitter profit sharing plan, as then designed, was in accordance with the applicable sections of the Internal Revenue Code (IRC). The Plan has not received an opinion letter specific to the Plan, and the Plan has not been amended since receiving the opinion letter; however, the Plan administrator believes the Plan is designed and operated in compliance with the applicable requirements of the IRC.

U. S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2025, and 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2022.

Risk and Uncertainties
The Plan provides for various investment options. These investments are exposed to various risks, such as interest rate, market, and credit. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of such investment securities, it is at least reasonably possible that changes in risks in the near term could materially affect participants' account balances and the amounts reported in the statement of net assets available for plan benefits and statement of changes in net assets available for plan benefits.

NOTE 3 – PARTY-IN-INTEREST TRANSACTIONS AND ADMINISTRATION OF PLAN ASSETS

A party-in-interest is defined as a fiduciary or employee of the Plan, any person who provides service to the plan, an employer whose employees are covered by the plan, an employee organization whose members are covered by the plan, a person who owns 50 percent or more of such an employer or employee organization, or a relative of such persons mentioned.

The Plan's investments are held in participant directed accounts at Mid Atlantic Trust Company, the Custodian; therefore, any transaction executed with the Custodian qualifies as a party-in-interest transaction. Certain costs are incurred as transactions occur; these costs are included in the price of investments bought and sold and are not separately quantifiable.

The Plan's records are maintained by Paychex, the third-party administrator and recordkeeper of the Plan; therefore, any transaction executed with the third-party administrator qualifies as a party-in-interest transaction. There are no transactions with the third-party administrator other than payment for its services. For the year ended December 31, 2025, administrative expenses paid from Plan assets totaled $58,290.

Notes receivable from participants also qualify as party-in-interest transactions and totaled $66,424 and $83,315 as of December 31, 2025 and 2024, respectively.

The Plan Sponsor is a party in interest. Certain administrative functions are performed by employees of the Plan Sponsor. No such employee receives compensation from the Plan.

NOTE 4 – FAIR VALUE MEASUREMENTS

The Plan’s investments are reported at fair value in the accompanying statement of net assets available for benefits.

ASC 820, *Fair Value Measurements*, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs were used only when Level 1 or Level 2 inputs were not available.

ASC 820 establishes a three-level valuation hierarchy for measurement and disclosure of fair value. The valuation hierarchy is based upon the transparency of inputs used to measure fair value. The three levels are as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

NOTE 4 – FAIR VALUE MEASUREMENTS (Cont.)

Level 2 – Inputs to the valuation methodology include: quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – significant unobservable inputs (including management's own assumptions in determining the fair value of investments).

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2025, and 2024.

Mutual Funds: Valued at the daily closing price as reported by the fund. Mutual funds (Investments, at fair value) held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Collective investment trusts and pooled separate accounts: Valued at the net asset value per unit of the fund, as a practical expedient. The net asset value is based on the fair value of the underlying investments held by the fund less its liabilities. These investments are redeemable at net asset value on a daily basis and have no unfunded commitments. In accordance with accounting guidance, investments measured at net asset value as a practical expedient are not classified within the fair value hierarchy.

The following tables present the level within the fair value hierarchy at which the Plan's financial assets are measured on a recurring basis as of December 31, 2025, and 2024:

		Fair Value Measurements Using:		
Assets at December 31, 2025	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual Funds	$ 11,001,941	$ 11,001,941	$ -	$ -
Collective Investment Trusts	9,149,992	-	-	-
Pooled Separate Accounts	1,346,841	-	-	-
Total	$ 21,498,774	$ 11,001,941	$ -	$ -

NOTE 4 – FAIR VALUE MEASUREMENTS (Cont.)

		Fair Value Measurements Using:		
Assets at December 31, 2024	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual Funds	$ 8,541,371	$ 8,541,371	$ -	$ -
Collective investment trusts	7,240,637			
Pooled Separate Accounts	881,819			
Total	$ 16,663,827	$ 8,541,371	$ -	$ -

In accordance with ASC Subtopic 820-10, Investments, at contract value (fully benefit-responsive investment contracts) are measured at contract value rather than fair value. As a result, these investments have not been classified within the fair value hierarchy. See note 5.

NOTE 5 - FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT

The Plan has a fully benefit-responsive investment contract (FBRIC) with Standard. This contract meets the fully benefit-responsive investment contract criteria and therefore is reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan. Contract value represents contributions made under each contract, plus earnings, less participant withdrawals and administrative expenses. As of December 31, 2025, and 2024, the FBRICs contract value was $134,865 and $132,337 respectively.

December 31,	2025	2024
Investments, at contract value	$ 134,865	$ 132,337

The investment contract held by the Plan is a traditional guaranteed investment contract. The contract issuer is contractually obligated to repay the principal and interest at a specified interest rate, that is guaranteed to the Plan. The crediting rate is based on a formula established by the contract issuer. The crediting rate is reviewed on a quarterly basis for resetting.

The Plan's ability to receive amounts due in accordance with the FBRIC is dependent on the third-party issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments. Certain events, such as the premature termination of the contract by the Plan, partial or total termination of the Plan, divestitures, layoffs, and the liberalization of plan withdrawal or transfer rules may limit the Plan's ability to transact at contract value with Standard.

NOTE 5 - FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT (Cont.)

Standard may terminate the contract with 30 days advance written notice to the contract owner for reasonable cause, which includes the contract owner's failure to abide by state or federal law, failure to render performance necessary to comply with the terms of the contract, failure to maintain assets of at least $25,000, and plan disqualification.

No events are probable of occurring that would limit the Plan's ability to transact at contract value with the Plan participants or issuers.

NOTE 6 - INFORMATION PREPARED AND CERTIFIED BY THE CUSTODIANS

All Investment information presented in the accompanying financial statements and supplemental schedules, including investments held and net appreciation/depreciation in fair value of investments and interest and dividends, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by the custodian, Mid Atlantic Trust Company, in accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Accordingly, Mid Atlantic Trust Company, the Custodian, has certified that the following information included in the accompanying financial statements and supplemental schedule is complete and accurate:

- Investments held as shown in the statement of net assets available for benefits as of December 31, 2025;
- Net appreciation in fair value of investments, and interest and dividends, as shown in the statement of changes in net assets available for benefits for the year ended December 31, 2025; and
- All information in Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2025.

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as complete and accurate by the custodians as of December 31:

Investments	**2025**	**2024**
Investments, at fair value	$ 21,498,774	$ 16,663,827
Investments, at contract value	134,865	132,337
Total	**$ 21,633,639**	**$ 16,796,164**

Investment Income	Year Ended December 31, 2025	Year Ended December 31, 2024
Net Appreciation/(Depreciation) in Value of Investments	$ 2,444,477	$ 1,558,099
Interest and Dividends	765,200	655,026
Total Certified Investment Income	**$ 3,209,677**	**$ 2,213,125**
Interest on Notes Receivable from Participants (Not Certified)	6,136	6,137
Total Investment Income/(Loss)	**$ 3,215,813**	**$ 2,219,262**

NOTE 6 - INFORMATION PREPARED AND CERTIFIED BY THE CUSTODIANS (Cont.)

Interest income on notes receivable from participants of $6,136 and $6,137 for the years ended December 31, 2025 and 2024, respectively, is not covered by the certification because participant loans are not held by the Custodian. Those amounts are included in interest and dividends in the statement of changes in net assets available for benefits.

NOTE 7 – EMPLOYER CONTRIBUTION RECEIVABLE

The employer contribution receivable consists of the following:

	2025	2024
Safe Harbor Non-Elective Contribution	$ 205,772	$ 164,642
Discretionary Profit-Sharing Contribution	309,987	397,715
Total employer contribution receivable	**$ 515,759**	**$ 562,357**

The 2025 employer contribution of $515,759 comprises the safe harbor nonelective contribution of $205,772 and the discretionary profit-sharing contribution of $309,987. No portion of the 2025 employer contribution had been deposited to the Trust as of December 31, 2025. The amount was funded during 2026. See Note 12.

NOTE 8 – UNCOLLECTIBLE EMPLOYER CONTRIBUTIONS – 2024 ALLOCATIONS

During 2025, the Plan wrote off $49,200 of 2024 employer contributions receivable related to discretionary profit-sharing allocations for two participants. The participants declined the allocations, and the Plan Sponsor directed that the amounts not be funded and any amounts already credited be returned. Management determined the receivable would not be collected.

The write-off is presented separately as “Uncollectible employer contributions—2024 allocations” in the 2025 statement of changes in net assets available for benefits. It was recognized as a change in accounting estimate in 2025; beginning net assets and the 2024 financial statements were not restated.

NOTE 9 – INVESTMENTS REPRESENTING 5% OR MORE OF NET ASSETS

The following information represents investments that represent 5% or more of the Plan’s Assets as of December 31:

Interest in investments	2025	2024
Principal Lifetime Hybrid 2030 CIT	$ 3,077,895	$ 2,611,681
Fidelity Nasdaq Composite Index Fund	2,554,718	2,072,862
Principal Lifetime Hybrid 2035 CIT	2,544,515	2,239,853
American Funds Washington Mutual Investors Fund Class R6	1,852,487	1,571,742
American Funds Fundamental Investors Class R6	1,677,708	1,358,161
Principal Lifetime Hybrid 2045 CIT	1,484,942	-
Principal Large Cap S&P 500 Index Separate Account	1,288,446	-

NOTE 10 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of Net Assets Available for Benefits per the financial statements to the Form 5500 for the year ending December 31, 2025, and 2024, respectively:

	DECEMBER 31,	
	2025	2024
Net Assets Available for Benefits as Per F/S	$ 22,215,822	$ 17,441,836
Net Assets Available for Benefits as Per 5500	$ 22,215,822	$ 17,441,836

The following is a reconciliation of the Changes in Net Assets Available for Benefits per the financial statements to the Form 5500 for the year ending December 31, 2025, and 2024, respectively:

	DECEMBER 31,	
	2025	2024
Changes in Net Assets Available for Benefits as Per F/S	$ 4,773,986	$ 3,698,771
Changes in Net Assets Available for Benefits as per 5500	$ 4,773,986	$ 3,698,771

NOTE 11 – ERISA FIDELITY BOND

The Plan has complied with the fidelity bonding requirements of ERISA and is covered by a fidelity bond of $500,000 for the years ended December 31, 2025, and 2024, respectively.

NOTE 12 – SUBSEQUENT EVENTS

ASC Topic 855, Subsequent Events, establishes general standards of accounting for and disclosure of events that occur after the statement of net assets available for benefits date but before financial statements are issued or are available to be issued. For the year ended December 31, 2025, management has evaluated all subsequent events through September 30, 2026, which is the date the financial statements were available to be issued.

During 2026, the Company funded the 2025 employer contribution of $515,759 recorded as a receivable at December 31, 2025. No other subsequent events were identified that require recognition or disclosure in the financial statements.

SOUTH FLORIDA SURGICAL SPECIALISTS 401(K) PROFIT SHARING PLAN AND TRUST

SUPPLEMENTARY SCHEDULES
DECEMBER 31, 2025

EIN: 20-1759480
Plan Number: 002

(a)	(b) Identity of Issuer, borrower, lessor or similar party	(c) Description of Investment	**(d) Cost	(e) Current Value
	GUARANTEED INVESTMENT CONTRACT			
	Standard	Stable Asset Fund Class II	**	$ 134,865
	MUTUAL FUNDS:			
	American Beacon	Registered Investment Company - Large Cap Value Fund R6 Class	**	1,097,059
	American Beacon	Registered Investment Company - Small Cap Value Fund R6 Class	**	144,461
	The American Funds	Registered Investment Company - Fundamental Investors Class R6	**	1,677,708
	The American Funds	Registered Investment Company - New World Fund Class R6	**	47,503
	The American Funds	Registered Investment Company - Washington Mutual Investors Fund Class R6	**	1,852,487
	The American Funds	Registered Investment Company - Income Fund of America Class R6	**	253,957
	Calvert Asset Management	Registered Investment Company - Calvert Income Fund	**	30,236
	Clearbridge	Registered Investment Company - Growth Fund Class IS	**	139,047
	Cohen & Steers	Registered Investment Company - Realty Share Fund Class Z	**	53,153
	Dimensional Fund Advisors	Registered Investment Company - U.S. Targeted Value Portfolio Institutional Class	**	31,925
	Fidelity	Registered Investment Company - Nasdaq Composite Index Fund	**	2,554,718
	Franklin Templeton	Registered Investment Company - Foreign Fund Class R6	**	5,073
	Franklin Templeton	Registered Investment Company - Templeton Global Bond Fund Class R6	**	112,381
	Janus Henderson	Registered Investment Company - Enterprise Fund Class N	**	433,393
	Janus Henderson	Registered Investment Company - Mid Cap Value Fund Class N	**	102,659
	Mainstay Funds	Registered Investment Company - High Yield Corporate Bond Fund Class I	**	44,619
	PIMCO Funds	Registered Investment Company - Income Fund Class I-2	**	45,671
	PIMCO Funds	Registered Investment Company - Long Duration Total Return Fund Institutional Class	**	105
	PIMCO Funds	Registered Investment Company - Stock Plus Intl I Fund	**	59,724
	The Royce Funds	Registered Investment Company - Small Company Growth I Fund	**	320,663
	Thornburg Mutual Funds	Registered Investment Company - International Value R6 Fund	**	371,071
	Vanguard Group	Registered Investment Company - Capital Cycles Fund Investor Shares	**	334,798
	Vanguard Group	Registered Investment Company - Windsor Fund Admiral Shares	**	1,042,880
	Vanguard Group	Registered Investment Company - Developed Markets Index Fund Admiral Shares	**	176,755
	Vanguard Group	Registered Investment Company - Inflation Protected Securites Fund Admiral Shares	**	69,895
		Total Mutual Funds		**11,001,941**
	POOLED SEPARATE ACCOUNTS:			
	Principal Life Insurance Company	Pooled Separate Accounts - Large Cap S&P 500 Index Fund Institutional Class	**	1,288,446
	Principal Life Insurance Company	Pooled Separate Accounts - Mid Cap S&P 400 Index Fund Class R6	**	12,092
	Principal Life Insurance Company	Pooled Separate Accounts - Small Cap S&P 600 Index Fund Class R6	**	46,303
		Total Pooled Separate Accounts		**1,346,841**
	COLLECTIVE INVESTMENT TRUSTS:			
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid Income CIT	**	116
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2015 CIT	**	145,828
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2020 CIT	**	87,395
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2025 CIT	**	656,637
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2030 CIT	**	3,077,895
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2035 CIT	**	2,544,515
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2040 CIT	**	483,690
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2045 CIT	**	1,484,942
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2050 CIT	**	310,358
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2055 CIT	**	263,971
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2060 CIT	**	60,222
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2065 CIT	**	31,873
	Principal Global Inventors Trust Co.	Common/Collective Trust - Principal LifeTime Hybrid 2070 CIT	**	2,550
		Total Collective Investment Trusts		**9,149,992**
	PARTICIPANT LOANS:			
*	Note Receivable from Participants	Interest Rates Ranges from 4.25% to 9.5%, maturing no later than April 2029	**	66,424
		Grand Total		**$ 21,700,063**

* Represents a party-in-interest.
** All investments are participant directed and historical cost information is not maintained by the Plan custodian;
therefore, it is not included in the above Schedule of Assets Held at End of Year.

The information in this schedule has been certified as to its completeness and accuracy by the Plan custodian.